

1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number
County: <u>SEWARD</u>		<u>SE 1/4 SN 1/4 SE 1/4</u>	<u>6</u>		<u>35</u>	<u>5</u>	<u>33</u>	<u>W</u>

Distance and direction from nearest town or city street address of well if located within city?

2	WATER WELL OWNER: <u>TRC ENVIRONMENTAL CORP</u> <u>2313 W. SAM HOUSTON PKY STE 107</u> RR #, St. Address, Box #: _____ City, State, ZIP Code : <u>HOUSTON TX 77043</u>	Board of Agriculture, Division of Water Resources Application Number: _____
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3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>114</u> ft. WELL'S STATIC WATER LEVEL _____ ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 8 Air Conditioning </div> <div> 9 Dewatering <input checked="" type="checkbox"/> Monitoring Well 11 Injection Well 12 Other _____ </div> </div>
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Was a chemical / bacteriological sample submitted to Department? Yes _____ No X _____
If yes, mo/day/yr sample was submitted _____

Water Well Disinfected: Yes _____ No _____

5	TYPE OF BLANK CASING USED:
<div style="display: flex; justify-content: space-between;"> <div>1 Steel <u>2 PVC</u></div> <div>3 RMP (SR) 4 ABS</div> <div>5 Wrought 6 Asbestos-Cement</div> <div>7 Fiberglass 8 Concrete Tile</div> <div>9 Other (Specify below) _____</div> </div>	
Blank casing diameter <u>2</u> in. Was casing pulled? Yes _____ No <u>X</u> _____ If yes, how much _____ Casing height above or below land surface _____ in.	

6	GROUT PLUG MATERIAL: 1 Neat cement <u>2 Cement grout</u> 3 Bentonite 4 Other _____
Grout Plug Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.	
What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div> 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool </div> <div> 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens </div> <div> 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well </div> <div> 16 Other (specify below) _____ </div> </div>	
Direction from well? _____ How many feet? _____	

FROM	TO	PLUGGING MATERIALS
<u>114</u>	<u>0</u>	<u>Cement grout</u>

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>9/7/04</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>725</u> This Water Well Record was completed on (mo/day/year) <u>11/1/04</u> under the business name of <u>TRC Environmental Corp</u> by (signature) <u>Randy Smith</u>
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INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.